ST ANNS REST HOME

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MILWAUKEE 53204 Phone: (414) 383-2630)	Ownership:	Nonprofit Church/Corporation
Operated from 1/1 To 12/31 Days of Operation:	366	Highest Level License:	Skilled
Operate in Conjunction with Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds Set Up and Staffed (12/31/04):	50	Title 18 (Medicare) Certified?	No
Total Licensed Bed Capacity (12/31/04):	50	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31/04:	46	Average Daily Census:	45
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Services Provided to Non-Residents		Age, Gender, and Primary Di	agnosis	of Residents (1	12/31/04)	Length of Stay (12/31/04)	%
Home Health Care	No	Primary Diagnosis	8	Age Groups	*	Less Than 1 Year	21.7
Supp. Home Care-Personal Care	No					1 - 4 Years	56.5
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	6.5	More Than 4 Years	21.7
Day Services	No	Mental Illness (Org./Psy)	21.7	65 - 74	6.5		
Respite Care	No	Mental Illness (Other)	17.4	75 - 84	15.2		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	52.2	*********	*****
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	19.6	Full-Time Equivalent	
Congregate Meals	No	Cancer	0.0			Nursing Staff per 100 Res	idents
Home Delivered Meals	No	Fractures	2.2	İ	100.0	(12/31/04)	
Other Meals	No	Cardiovascular	28.3	65 & Over	93.5		
Transportation	No	Cerebrovascular	6.5			RNs	5.0
Referral Service	No	Diabetes	6.5	Gender	%	LPNs	14.5
Other Services	No	Respiratory	4.3			Nursing Assistants,	
Provide Day Programming for		Other Medical Conditions	13.0	Male	0.0	Aides, & Orderlies	33.4
Mentally Ill	No			Female	100.0		
Provide Day Programming for			100.0	İ			
Developmentally Disabled	No	İ		j	100.0	İ	
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Method of Reimbursement

		edicare itle 18			Medicaid 'itle 19			Other			Private Pay	:		amily Care			anaged Care	l		
Level of Care	No.	%	Per Diem (\$)	No.	્ર	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	0	0.0	0	36	87.8	141	0	0.0	0	5	100.0	210	0	0.0	0	0	0.0	0	41	89.1
Intermediate				5	12.2	114	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	5	10.9
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende:	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		41	100.0		0	0.0		5	100.0		0	0.0		0	0.0		46	100.0

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Admissions, Discharges, and		Percent Distribution	n of Residents'	Condit	ions, Services, an	d Activities as of 12/	31/04
Deaths During Reporting Period					% Needing		Total
Percent Admissions from:		Activities of	%		sistance of	% Totally	Number of
Private Home/No Home Health	14.3	Daily Living (ADL)	Independent	One	or Two Staff	Dependent	Residents
Private Home/With Home Health	7.1	Bathing	0.0		45.7	54.3	46
Other Nursing Homes	14.3	Dressing	19.6		45.7	34.8	46
Acute Care Hospitals	42.9	Transferring	26.1		32.6	41.3	46
Psych. HospMR/DD Facilities	0.0	Toilet Use	39.1		32.6	28.3	46
Rehabilitation Hospitals	0.0	Eating	43.5		43.5	13.0	46
Other Locations	21.4	******	******	*****	******	******	*****
Total Number of Admissions	14	Continence		%	Special Treatmen	ts	%
Percent Discharges To:		Indwelling Or Extern	al Catheter	0.0	Receiving Resp	iratory Care	6.5
Private Home/No Home Health	0.0	Occ/Freq. Incontiner	nt of Bladder	65.2	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	14.3	Occ/Freq. Incontiner	nt of Bowel	50.0	Receiving Suct	ioning	0.0
Other Nursing Homes	0.0	_			Receiving Osto	my Care	0.0
Acute Care Hospitals	7.1	Mobility			Receiving Tube	Feeding	0.0
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	0.0	Receiving Mech	anically Altered Diets	34.8
Rehabilitation Hospitals	0.0					_	
Other Locations	7.1	Skin Care			Other Resident C	haracteristics	
Deaths	71.4	With Pressure Sores		0.0	Have Advance D	irectives	87.0
Total Number of Discharges		With Rashes		10.9	Medications		
(Including Deaths)	14				Receiving Psyc	hoactive Drugs	65.2

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

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		Own	ership:	Bed	Size:	Lic	ensure:		
	This	Non	profit	50	-99	Ski	lled	Al	1
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	90.0	87.4	1.03	88.2	1.02	87.3	1.03	88.8	1.01
Current Residents from In-County	95.7	86.8	1.10	88.5	1.08	85.8	1.11	77.4	1.24
Admissions from In-County, Still Residing	71.4	21.8	3.28	21.6	3.31	20.1	3.56	19.4	3.68
Admissions/Average Daily Census	31.1	159.1	0.20	187.2	0.17	173.5	0.18	146.5	0.21
Discharges/Average Daily Census	31.1	159.6	0.19	182.1	0.17	174.4	0.18	148.0	0.21
Discharges To Private Residence/Average Daily Census	4.4	63.2	0.07	76.7	0.06	70.3	0.06	66.9	0.07
Residents Receiving Skilled Care	89.1	96.1	0.93	96.7	0.92	95.8	0.93	89.9	0.99
Residents Aged 65 and Older	93.5	96.5	0.97	89.4	1.05	90.7	1.03	87.9	1.06
Title 19 (Medicaid) Funded Residents	89.1	50.4	1.77	48.4	1.84	56.7	1.57	66.1	1.35
Private Pay Funded Residents	10.9	33.2	0.33	31.2	0.35	23.3	0.47	20.6	0.53
Developmentally Disabled Residents	0.0	0.5	0.00	0.2	0.00	0.9	0.00	6.0	0.00
Mentally Ill Residents	39.1	33.9	1.15	34.7	1.13	32.5	1.20	33.6	1.16
General Medical Service Residents	13.0	26.1	0.50	23.5	0.55	24.0	0.54	21.1	0.62
Impaired ADL (Mean)	55.2	51.2	1.08	50.4	1.10	51.7	1.07	49.4	1.12
Psychological Problems	65.2	62.3	1.05	58.0	1.12	56.2	1.16	57.7	1.13
Nursing Care Required (Mean)	6.5	7.1	0.92	7.3	0.90	7.7	0.84	7.4	0.88